## Case 16-24101 Doc 1 Filed 07/27/16 Entered 07/27/16 14:14:57 Desc Main Document Page 1 of 51

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar	e the name that is on government-issued ure identification (for mple, your driver's use or passport).	Diane First name R.	First name
			Middle name	Middle name
	iden	g your picture tification to your ting with the trustee.	Cantu Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ide your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security aber or federal vidual Taxpayer utification number	xxx-xx-0122	

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Case number (if known)

Debtor 1 Diane R. Cantu

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs
5.	Where you live	20000 North Onlove of Drive	If Debtor 2 lives at a different address:
		36696 North Oakwood Drive Lake Villa, IL 60046  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Lake	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
5.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Diane R. Cantu

⊃ar	t 2: Tell the Court About	Your Ba	ankruptcy Ca	ise				
7.	The chapter of the Bankruptcy Code you are				each, see <i>Notice Required by</i> age 1 and check the appropriat	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box.		
	choosing to file under	■ Cł	hapter 7					
		☐ Ch	hapter 11					
		☐ Ch	hapter 12					
		☐ Ch	hapter 13					
3.	How you will pay the fee	_	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.					
					ments. If you choose this option	on, sign and attach the Application for Individuals to Pay		
			but is not req applies to you	uired to, waive you ur family size and y	ur fee, and may do so only if yo you are unable to pay the fee ir	n only if you are filing for Chapter 7. By law, a judge may ur income is less than 150% of the official poverty line th n installments). If you choose this option, you must fill out cial Form 103B) and file it with your petition.	at	
P. Have you filed for ■ No.								
	bankruptcy within the last 8 years?	☐ Ye	s.					
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy	■ No	)					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	es.					
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your	■ No	Go to I	ine 12.				
	residence?	☐ Ye	s. Has yo	our landlord obtaine	ed an eviction judgment agains	t you and do you want to stay in your residence?		
				No. Go to line 12.				
				Yes. Fill out <i>Initia</i> bankruptcy petitic		Judgment Against You (Form 101A) and file it with this		

		Document	Page 4 01 51
Debtor 1	Diane R. Cantu		Case number (if known)

art	3: Report About Any Bu	sinesses `	You Own as a Sole Propri	etor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.			
		☐ Yes.	Name and location of bu	siness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, St	ate & ZIP Code		
	it to this petition.		Check the appropriate b	ox to describe your business:		
			☐ Health Care Bus	iness (as defined in 11 U.S.C. § 101(27A))		
			☐ Single Asset Rea	al Estate (as defined in 11 U.S.C. § 101(51B))		
			☐ Stockbroker (as)	defined in 11 U.S.C. § 101(53A))		
			☐ Commodity Brok	er (as defined in 11 U.S.C. § 101(6))		
			☐ None of the above	ve		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	deadlines operation	ou are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appraadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, stater erations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the profit U.S.C. 1116(1)(B).			
	For a definition of small	■ No.	I am not filing under Cha	apter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.			
		☐ Yes.	I am filing under Chapte	r 11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Part	A: Report if You Own or	Have Any	Hazardous Property or A	ny Property That Needs Immediate Attention		
	<u> </u>		Tiazardous Froperty of A	Troporty mac recess miniculate Attention		
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and	■ No. □ Yes.	What is the hazard?			
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	Number, Street, City, State & Zip Code		

Debtor 1 Diane R. Cantu Document Page 5 of 51

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Diane R. Cantu		Documen	Case nu	Imber (if known)	
Par	6: Answer These Quest	ions for Re	eporting Purposes			
16.	What kind of debts do you have?	16a.		sumer debts? Consumer debts are nal, family, or household purpose."	defined in 11 U.S.C. § 101(8) as "incurred by an	
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
		16b.		iness debts? Business debts are dement or through the operation of the		
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you own	e that are not consumer debts or bus	siness debts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7.	. Go to line 18.		
	Do you estimate that after any exempt property is excluded and	■ Yes.		or filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses e paid that funds will be available to distribute to unsecured creditors?		
	administrative expenses		■ No			
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes			
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19 □ 200-99		□ 1,000-5,000 □ 5001-10,000 □ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000	
19.	How much do you estimate your assets to be worth?	<b>\$100,0</b>	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion	
20.	How much do you estimate your liabilities to be?	□ \$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion	
Part	7: Sign Below					
For	you	I have ex	amined this petition, and I decla	re under penalty of perjury that the i	nformation provided is true and correct.	
					gible, under Chapter 7, 11,12, or 13 of title 11, d I choose to proceed under Chapter 7.	
				t pay or agree to pay someone who notice required by 11 U.S.C. § 342(b	is not an attorney to help me fill out this )).	
		I request	relief in accordance with the cha	apter of title 11, United States Code,	specified in this petition.	
		bankrupto and 3571	cy case can result in fines up to		ney or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,	
		Diane R		Signature of D	ebtor 2	
		Executed	on July 27, 2016 MM / DD / YYYY	Executed on	MM / DD / YYYY	

Debtor 1 Diane R. Cantu Document Page 7 of 51 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ James T. Magee	Date	July 27, 2016
Signature of Attorney for Debtor	<del></del>	MM / DD / YYYY
James T. Magee		
Printed name		
Magee Hartman, P.C.		
Firm name		
444 North Cedar Lake Road		
Round Lake, IL 60073		
Number, Street, City, State & ZIP Code		
Contact phone (847) 546-0055	Email address	bk@mageehartman.com
1729446		
Bar number & State		

		Docume	ent Page 8 of 51	
Fill in this infor	mation to identify your	case:		
Debtor 1	Diane R. Cantu			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				
(if known)				□ Ch
				an

Check if this is an amended filing

### Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as Value o	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	139,602.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	139,602.00
Pa	t 2: Summarize Your Liabilities		
			abilities : you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	8,904.45
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	36,896.72
	Your total liabilities	\$	45,801.17
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,955.58
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,464.00
Pa	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sch	edules.
7.	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Page 9 of 51 Case number (if known) Debtor 1 Diane R. Cantu

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

7,531.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cl	aim
From Fait 4 on Schedule E/F, copy the following.		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	8,904.45
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	8,904.45

		Document	Page 10 of 51		
Fill in this infor	mation to identify your	case and this filing:			
Debtor 1	Diane R. Cantu				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS		
O					
Case number					☐ Check if this is an amended filing
					3
Official Fo	orm 106A/B				
Schedul	le A/B: Prop	ertv			12/15
		e items. List an asset only once.	If an asset fits in more than o	ne category, list the asset	
think it fits best. I	Be as complete and accura	ate as possible. If two married peo	ople are filing together, both a	re equally responsible for	supplying correct
ntormation. It mo Answer every que		a separate sheet to this form. On	the top of any additional page	es, write your name and ca	ise number (if known).
Part 1: Describe	Each Residence, Building	g, Land, or Other Real Estate You	Own or Have an Interest In		
1. Do you own or	have any legal or equitabl	e interest in any residence, buildi	ng, land, or similar property?		
_					
No. Go to Pa	ırt 2.				
☐ Yes. Where	is the property?				
Part 2: Describe	Your Vehicles				
Part 2. December	Tour Tourious				
		uitable interest in any vehicles			vehicles you own that
someone else dr	ives. If you lease a vehic	le, also report it on Schedule G	: Executory Contracts and U	Inexpired Leases.	
3. Cars, vans, t	rucks, tractors, sport u	tility vehicles, motorcycles			
_	, , ,				
□ No					
Yes					
3.1 Make:	Chevrolet	Who has an interest in	the property? Check one		claims or exemptions. Put ured claims on Schedule D:
Model:	Suburban	■ Debtor 1 only			laims Secured by Property.
Year:	1998	Debtor 2 only		Current value of the	Current value of the
Approxima	te mileage: 150	,000 Debtor 1 and Debtor	2 only	entire property?	portion you own?
Other infor	mation:	At least one of the de	ebtors and another		
				\$1,000.00	\$1,000.00
		Check if this is com	nmunity property	Ψ1,000.00	- <del> </del>
		TVs and other recreational veonal watercraft, fishing vessels,			
_,,a,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ato, transfer, motore, pere	onal materorally norming records,	and mind and a motor by one as		
■ No					
☐ Yes					
5 Add the doll	ar value of the portion	you own for all of your entries	s from Part 2, including an	y entries for	¢4 000 00
.pages you h	ave attached for Part 2	. Write that number here			\$1,000.00
	Your Personal and Hous				
Do you own or	have any legal or equit	able interest in any of the foll	owing items?		Current value of the
					portion you own? Do not deduct secured
					claims or exemptions.
6. Household g	oods and furnishings	, linens, china, kitchenware			
∟хаптріе́§. М	ajoi appiiandes, lunnilure	, micro, cimia, kitchenware			

Official Form 106A/B Schedule A/B: Property

□ No

Debtor 1	Diane R. Cantu  Doc 1 Filed 07/27/16 Efficied 07/27/16 14.14.57  Document Page 11 of 51  Case number (if known)	Desc Main
■ Yes.	Describe	
	Household Furniture and Furnishings	\$700.00
□ No	nics les: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music continuing cell phones, cameras, media players, games  Describe	ollections; electronic devices
	Home Computer	\$300.00
Examp	<ul> <li>bles of value</li> <li>les: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, other collections, memorabilia, collectibles</li> <li>Describe</li> </ul>	or baseball card collections;
Examp. ■ No	ent for sports and hobbies les: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes a musical instruments  Describe	and kayaks; carpentry tools;
■ No	ns  oles: Pistols, rifles, shotguns, ammunition, and related equipment  Describe	
□ No	s ples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories  Describe	
	Wearing Apparel	\$300.00
■ No □ Yes.	bles: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, g  Describe	old, silver
Exam ■ No —	rm animals ples: Dogs, cats, birds, horses  Describe	
■ No	her personal and household items you did not already list, including any health aids you did not list  Give specific information	
	the dollar value of all of your entries from Part 3, including any entries for pages you have attached art 3. Write that number here	\$1,300.00
	scribe Your Financial Assets	
Do you o	vn or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 2

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Case number (if known) Document Debtor 1 Diane R. Cantu 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition \$200.00 Cash on Hand 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... **Bank of America** \$200.00 17.1. Checking **Bank of America** \$300.00 Savings 17.2. **Great Lakes Credit Union** \$76.00 17.3. Savings 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans Yes. List each account separately. Type of account: Institution name: 401(k) Profit Sharing Plan M. Holland Company \$134,126.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others □ No Institution name or individual: Yes. ..... \$2,400.00 Rent Landlord 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description.

Case 16-24101

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Desc Main

		Case 16-2410	1 Doc 1			Desc Main
D	ebtor 1	Diane R. Cantu		Document	Page 13 of 51 Case number (if known)	
24		C. §§ 530(b)(1), 529A(b	), and 529(b)(1).		gram, or under a qualified state tuition prog ne records of any interests.11 U.S.C. § 521(c):	gram.
25.	Trusts.	equitable or future in	terests in prope	erty (other than anythin	g listed in line 1), and rights or powers exe	cisable for your benefit
	■ No □ Yes.	Give specific information	on about them		, , ,	·
26.	Examp  ■ No		imes, websites, p	ets, and other intellectu proceeds from royalties a	nal property nd licensing agreements	
27	Examp ■ No	es, franchises, and othes: Building permits, e	xclusive licenses		n holdings, liquor licenses, professional license	s
B.4		·				Current value of the
IVI	oney or p	property owed to you	f			Current value of the portion you own?  Do not deduct secured claims or exemptions.
28.	. Tax ref	unds owed to you				
	■ No					
	☐ Yes. (	Give specific informatio	n about them, in	cluding whether you alre	ady filed the returns and the tax years	
29	■ No			usal support, child suppo	ort, maintenance, divorce settlement, property	settlement
30.		mounts someone ow les: Unpaid wages, dis- benefits; unpaid lo	ability insurance		efits, sick pay, vacation pay, workers' compen	sation, Social Security
	☐ Yes.	Give specific information	on			
31.		es in insurance policies: Health, disability, c		health savings account (I	HSA); credit, homeowner's, or renter's insurand	ce
	☐ Yes. I	Name the insurance co		olicy and list its value.	Donofician v	Currender or refund
		(	Company name:		Beneficiary:	Surrender or refund value:
32.	If you a someon		living trust, expe	n someone who has die ct proceeds from a life in:	ed surance policy, or are currently entitled to rece	ive property because
33.	Examp ■ No		ment disputes, in	you have filed a lawsui surance claims, or rights	it or made a demand for payment to sue	
<u></u>					an annual	ant off alalies
34.	. Other c ■ No	ontingent and unliqui	idated claims of	every nature, including	g counterclaims of the debtor and rights to	set off claims

Official Form 106A/B Schedule A/B: Property page 4

☐ Yes. Describe each claim.......

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Debt	tor 1	Diane R. Cantu		Document	Page 14 01	51 Case number (if known)	
35. <b>A</b>	ny fin	nancial assets you did not	t already list				
	No						
	l Yes.	Give specific information					
		the dollar value of all of yo art 4. Write that number h		•		•	\$137,302.00
Part :	5: De	scribe Any Business-Related	l Property You (	Own or Have an Interest	In. List any real esta	ate in Part 1.	
37. <b>D</b>	o you d	own or have any legal or equ	itable interest in	n any business-related p	roperty?		
	No. Go	to Part 6.					
	Yes. G	Go to line 38.					
	_						
Part (		scribe Any Farm- and Commo			n or Have an Interes	st In.	
46. <b>C</b>	ο γοι	ı own or have any legal o	r equitable int	erest in any farm- or	commercial fishir	ng-related property?	
I	No.	Go to Part 7.					
	□ Yes	s. Go to line 47.					
Part 7	7:	Describe All Property You	Own or Have ar	n Interest in That You Di	d Not List Above		
		ı have other property of a					
	_	ples: Season tickets, countr	y club member	rship			
	No						
Ш	I Yes.	Give specific information					
54.	Add t	the dollar value of all of yo	our entries fro	om Part 7. Write that r	umber here		\$0.00
							<u> </u>
Part 8	8:	List the Totals of Each Part	of this Form				
55.	Part 1	1: Total real estate, line 2					\$0.00
56.	Part 2	2: Total vehicles, line 5			\$1,000.00		
57.	Part 3	3: Total personal and hou	sehold items,	line 15	\$1,300.00		
58.	Part 4	4: Total financial assets, l	ine 36	_	\$137,302.00		
59.	Part 5	5: Total business-related	property, line	45	\$0.00		
60.	Part 6	6: Total farm- and fishing-	related prope	rty, line 52	\$0.00		
61.	Part 7	7: Total other property no	t listed, line 5	+	\$0.00		
62.	Total	personal property. Add lin	nes 56 through	61	\$139,602.00	Copy personal property t	otal <b>\$139,602.0</b> 0
63.	Total	of all property on Schedu	ule A/B. Add lii	ne 55 + line 62			\$139,602.00

Official Form 106A/B Schedule A/B: Property page 5

		17(1,111)		
Fill in this infor	mation to identify your	case:		
Debtor 1	Diane R. Cantu			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				Check if this is an amended filing

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
1998 Chevrolet Suburban 150,000 miles	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(c)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
Household Furniture and Furnishings	\$700.00		\$700.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: <b>6.1</b>			100% of fair market value, up to any applicable statutory limit	
Home Computer Line from Schedule A/B: 7.1	\$300.00		\$300.00	735 ILCS 5/12-1001(b)
Ellie Ilolii Gonedale 772.			100% of fair market value, up to any applicable statutory limit	
Wearing Apparel Line from Schedule A/B: 11.1	\$300.00		\$300.00	735 ILCS 5/12-1001(a)
Enterness software 702. The			100% of fair market value, up to any applicable statutory limit	
Cash on Hand Line from Schedule A/B: 16.1	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
Line nom <i>Genedale A/B</i> . 1911			100% of fair market value, up to any applicable statutory limit	

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Debtor 1 Diane R. Cantu

		ano in Janua				
		cription of the property and line on A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption	
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
		ng: Bank of America	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
	Line non	Tooliodale 77 B.			100% of fair market value, up to any applicable statutory limit	
	_	s: Bank of America	\$300.00		\$300.00	735 ILCS 5/12-1001(b)
	Line nom <i>Scriedule A/D</i> . 11.2				100% of fair market value, up to any applicable statutory limit	
	_	s: Great Lakes Credit Union	\$76.00		\$76.00	735 ILCS 5/12-1001(b)
	Line non	1 Scriedule A/B. 11.3			100% of fair market value, up to any applicable statutory limit	
	401(k) I Compa	Profit Sharing Plan: M. Holland	\$134,126.00		\$134,126.00	735 ILCS 5/12-1006
		n Schedule A/B: <b>21.1</b>			100% of fair market value, up to any applicable statutory limit	
		andlord n Schedule A/B: <b>22.1</b>	\$2,400.00		\$2,400.00	735 ILCS 5/12-901
	Line non	1 Schedule A/B. 22.1			100% of fair market value, up to any applicable statutory limit	
3.	(Subject	claiming a homestead exemption to adjustment on 4/01/19 and every			led on or after the date of adjustme	nt.)
	■ No					_
		s. Did you acquire the property covere	ed by the exemption wi	ithin 1	,215 days before you filed this case	?
		No Yes				
		169				

Fill in this infor	rmation to identify your	case:		
Debtor 1	Diane R. Cantu			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				Check if this is an
				amended filing

#### Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

		Documen	t Page	18 of 5	51	•		
Fill in this in	formation to identify your c	ase:						
Debtor 1	Diane R. Cantu							
	First Name	Middle Name	Last Nam	е				
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Nam	•				
(Spouse II, IIIIIg)	First Name	Middle Name	Last Nam	е				
United States	s Bankruptcy Court for the:	NORTHERN DISTRICT O	F ILLINOIS					
Case number	r							
(if known)							Check is	f this is an
							amende	ed filing
Official Fo	orm 106E/F							
	e E/F: Creditors W	ho Have Unsecur	ed Claim	S				12/15
	e and accurate as possible. Use				r araditara with NON	IDDIODITY A	Joimo Lic	
eft. Attach the name and case	reditors Who Have Claims Secu Continuation Page to this page number (if known). st All of Your PRIORITY Uns	e. If you have no information						
1. Do any cr	editors have priority unsecured	claims against you?						
☐ No. Go	to Part 2.							
Yes.								
identify wh possible, li Part 1. If m	your priority unsecured claims at type of claim it is. If a claim has ist the claims in alphabetical order nore than one creditor holds a par planation of each type of claim, so	s both priority and nonpriority and according to the creditor's nan ticular claim, list the other credi	mounts, list that ne. If you have n tors in Part 3.	claim here an nore than two	nd show both priority a	ind nonpriori	ty amounts the Continu	s. As much as
2.1 Inter	rnal Revenue Service	Last 4 digits of a	ccount number	0122	\$8,904.45	amount	\$0.00	\$8,904.45
	ty Creditor's Name						•	
_	. Box 7346 adelphia, PA 19101-7346	When was the de	ebt incurred?	2008		_		
	per Street City State Zlp Code	As of the date yo	u file, the claim	is: Check al	I that apply			
Who inc	urred the debt? Check one.	☐ Contingent						
■ Debto	or 1 only	☐ Unliquidated						
☐ Debto	or 2 only	☐ Disputed						
☐ Debto	or 1 and Debtor 2 only	Type of PRIORIT	Y unsecured cla	aim:				
☐ At lea	ast one of the debtors and another	☐ Domestic supp	ort obligations					
☐ Chec	k if this claim is for a commun	ty debt Taxes and cer	tain other debts	ou owe the	government			
Is the cla	aim subject to offset?	☐ Claims for dea	th or personal in	jury while you	u were intoxicated			
■ No		☐ Other. Specify						
☐ Yes			Federal In	come Tax	es			
Part 2: Lis	st All of Your NONPRIORITY	/ Unsecured Claims						
	editors have nonpriority unsec							
_ `	u have nothing to report in this pa		with your other	schedules.				
Yes.	2 1 212		•					
								,
unsecured	your nonpriority unsecured cla I claim, list the creditor separately creditor holds a particular claim, lis	for each claim. For each claim	listed, identify w	nat type of cla	aim it is. Do not list cl	aims already	included in	n Part 1. If more

Total claim

Part 2.

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Debtor 1 Diane R. Cantu Case number (if know) 4.1 \$84.67 Advocate Condell Medical Center Last 4 digits of account number 5061 Nonpriority Creditor's Name c/o Harris & Harris, Ltd. When was the debt incurred? 222 Merchandise Mart Plaza, #1900 Chicago, IL 60654 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Balance on Account ☐ Yes 4.2 Last 4 digits of account number **Advocate Condell Medical Center** 8343 \$438.49 Nonpriority Creditor's Name c/o Harris & Harris, Ltd. When was the debt incurred? 111 West Jackson Blvd., #400 Chicago, IL 60604-4134 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Balance on Account** Other. Specify 4.3 \$202.00 **AT&T Mobility** Last 4 digits of account number 1772 Nonpriority Creditor's Name c/o Afni When was the debt incurred? P. O. Box 3097 Bloomington, IL 61702 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Balance on Account ☐ Yes

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Debtor 1 Diane R. Cantu Case number (if know) 4.4 \$19,000.00 Charles and Susan Shimkus Last 4 digits of account number L527 Nonpriority Creditor's Name c/o Cartwright Law, P.C. When was the debt incurred? 728 Florsheim Drive Libertyville, IL 60048 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Balance on Account ☐ Yes 4.5 **Chicago Imaging Associates** Last 4 digits of account number \$246.60 019A Nonpriority Creditor's Name c/o Merchants' Credit Guide Co. When was the debt incurred? 223 W. Jackson Blvd., #400 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Balance on Account** Other. Specify 4.6 \$309.30 Comcast Last 4 digits of account number 9187 Nonpriority Creditor's Name c/o IC Systems When was the debt incurred? P. O. Box 64378 Saint Paul, MN 55164-0378 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Balance on Account ☐ Yes

Case 16-24101 Doc 1 Filed 07/27/16 Entered 07/27/16 14:14:57 Desc Main Document Page 21 of 51 Debtor 1 Diane R. Cantu Case number (if know) 4.7 \$505.50 **Erac Region N** Last 4 digits of account number 7912 Nonpriority Creditor's Name c/o Greentree & Associates When was the debt incurred? P. O. Box 3417 Escondido, CA 92033-3417 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Balance on Account ☐ Yes 4.8 **Great Lakes Credit Union** Last 4 digits of account number 0302 \$420.00 Nonpriority Creditor's Name **Building 290** When was the debt incurred? Great Lakes, IL 60088 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Balance on Account ☐ Yes Lake Zurich Police Photo 0084 \$200.00 4.9 Last 4 digits of account number Enforcemen Nonpriority Creditor's Name c/o Northwest Collectors When was the debt incurred? 3601 Algonquin Road, #232 Rolling Meadows, IL 60008 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated

3601 Algonquin Road, #232
Rolling Meadows, IL 60008

Number Street City State Zlp Code
Who incurred the debt? Check one.

□ Debtor 1 only
□ Debtor 2 only
□ Debtor 1 and Debtor 2 only
□ At least one of the debtors and another
□ Check if this claim is for a community debt
Is the claim subject to offset?
□ No
□ Yes

■ Other. Specify
■ As of the date you file, the claim is: Check all that apply

As of the date you file, the claim is: Check all that apply

As of the date you file, the claim is: Check all that apply

As of the date you file, the claim is: Check all that apply

As of the date you file, the claim is: Check all that apply

As of the date you file, the claim is: Check all that apply

As of the date you file, the claim is: Check all that apply

As of the date you file, the claim is: Check all that apply

As of the date you file, the claim is: Check all that apply

Check if this claim is: Check all that apply

As of the date you file, the claim is: Check all that apply

As of the date you file, the claim is: Check all that apply

As of the date you file, the claim is: Check all that apply

As of the date you file, the claim is: Check all that apply

As of the date you file, the claim is: Check all that apply

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Case number (if know)

Diane N. Cantu	Case Hamber (ii know)	
Northwestern Medical Group	Last 4 digits of account number 556E	\$582.01
Nonpriority Creditor's Name 26609 Network Place Chicago II. 60673 1366	When was the debt incurred?	
Chicago, IL 60673-1266  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Balance on Account	
Northwestern Medicine	Last 4 digits of account number 6681	\$1,589.42
Nonpriority Creditor's Name		<b>V.,000</b>
c/o Harris & Harris, Ltd. 111 West Jackson Blvd., #400 Chicago, IL 60604-4135	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Balance on Accounts	
Northwestern Medicine	Last 4 digits of account number	\$2,122.68
Nonpriority Creditor's Name		. ,
Lake Forest Hospital 660 North Westmoreland Road Lake Forest. IL 60045	When was the debt incurred?	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other Specify Balance on Accounts	

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Case number (if know) Debtor 1 Diane R. Cantu 4.1 **Northwestern Medicine** 7556 \$2,874.04 Last 4 digits of account number 3 Nonpriority Creditor's Name 28155 Network Place When was the debt incurred? Chicago, IL 60673-1281 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Balance on Account ☐ Yes 4.1 **Quest Diagnostics Incorporated** \$50.00 Last 4 digits of account number Nonpriority Creditor's Name c/o American Medical Collection When was the debt incurred? 4 Westchester Plaza, Building 4 Elmsford, NY 10523 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Balance on Accounts ☐ Yes 4.1 Saint Francis Hospital 8865 \$2,503.00 Last 4 digits of account number 5 Nonpriority Creditor's Name c/o Grant & Weber When was the debt incurred? 26575 West Agoura Road Calabasas, CA 91302 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Balance on Account ☐ Yes

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Case number (if know)

DCDIO	Dialie N. Calitu	Case named (in know)	
4.1	Saint Francis Hospital	Last 4 digits of account number 0055	\$2,503.99
	Nonpriority Creditor's Name c/o Grant & Weber, Inc. 861 Coronado Ctr Drive, #211 Henderson, NV 89052	When was the debt incurred?	-
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Balance on Account	_
4.1	Saint Joseph Hospital	Last 4 digits of account number 3402	\$788.00
7	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ100.00
	c/o Grand & Weber	When was the debt incurred?	
	26575 West Agoura Road		_
	Calabasas, CA 91302	_	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Balance on Account	-
4.1	Coint locamb Hoomital	0424	<b>\$700.00</b>
8	Saint Joseph Hospital  Nonpriority Creditor's Name	Last 4 digits of account number 0131	\$788.00
	c/o Grant & Weber, Inc.	When was the debt incurred?	
	861 Coronado Ctr Drive, #211		_
	Henderson, NV 89052		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□ ves	■ ou o v Ralance on Account	

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Case number (if know) Debtor 1 Diane R. Cantu 4.1 Sigma Health P.C. 4705 \$75.17 Last 4 digits of account number 9 Nonpriority Creditor's Name 10640 West 165th Street When was the debt incurred? Orland Park, IL 60467-8734 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Balance on Account 4.2 The Family Stress Clinic **GUO** \$138.00 Last 4 digits of account number 0 Nonpriority Creditor's Name When was the debt incurred? 1641 North Milwaukee Avenue, #7 Libertyville, IL 60048 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Balance on Account ☐ Yes 4.2 **United Hospital System** 0460 \$105.55 Last 4 digits of account number Nonpriority Creditor's Name P. O. Box 130 When was the debt incurred? Kenosha, WI 53141-0130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Balance on Account ☐ Yes

Document Page 26 of 51 Debtor 1 Diane R. Cantu Case number (if know)

Women's Health Group	Last 4 digits of account number 1731	\$1,370.30
Nonpriority Creditor's Name	<del></del>	
800 Austin Street	When was the debt incurred?	
East Tower, Suite 354		
Evanston, IL 60202-3454	<u></u>	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Balance on Account	

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Т	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	8,904.45
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	8,904.45
	01	On the Advance	01		otal Claim
Total	6f.	Student loans	6f.	\$	0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	_		0.00
		you did not report as priority claims	6g.	\$	0.00
	6h.	3 p. 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	36,896.72
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	36,896.72

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

		120021111	111 11111111111111111111111111111111111	
Fill in this infor	mation to identify your	case:		
Debtor 1	Diane R. Cantu			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for
Month-to-Month Residential Lease

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			III Paue zo i	11 3 1	
Fill in this i	nformation to identify your	case:			
Debtor 1	Diane R. Cantu				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
	, ,				
Case number (if known)	er				☐ Check if this is an
					amended filing
Official	Form 106H				
		obtoro			4045
Scheal	ule H: Your Cod	eptors			12/15
■ No □ Yes  2. Withit Arizona ■ No. 0	ou have any codebtors? (If the last 8 years, have you, California, Idaho, Louisiana, Go to line 3. Did your spouse, former spouse,	ı <b>lived in a community pr</b> Nevada, New Mexico, Pu	operty state or territor erto Rico, Texas, Wash	r <b>y?</b> (Community propert	ty states and territories include
in line 2 Form 1 out Col	2 again as a codebtor only i 06D), Schedule E/F (Official	f that person is a guaran Form 106E/F), or Sched	tor or cosigner. Make	Sure you have listed the DGG. Use Schedule D,  Column 2: The cree Check all schedule	,
3.1 <sub>N</sub>	ame			Schedule D, lin	
				☐ Schedule E/F, I☐ Schedule G, Iin	
N	umber Street				···
	ity	State	ZIP Code		
3.2 N	ame			□ Schedule D, lin □ Schedule E/F, I	<del></del>
				☐ Schedule E/F, I	
N	umber Street			_	
	ity	State	ZIP Code		

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Fill	in this information to identify your c	ase:								
Del	btor 1 Diane R. Ca	ntu			_					
	btor 2 buse, if filing)				_					
Uni	ited States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF ILLINOIS							
	se number 		-					ed filing ent showing	g postpetition cl	napter
$\cap$	fficial Form 106l					_			llowing date:	
	chedule I: Your Inc	omo				N	1M / DD/ Y	YYY		12/15
sup spo atta	as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  The describe Employment	are married and not fili ur spouse is not filing w	ng jointly, and your ith you, do not inclu	spouse i ide inforr	s liv natio	ing with on abou	you, incl your spo	ude inform ouse. If mo	nation about ye re space is ne	our eded,
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-fil	ing spouse	
	If you have more than one job,	Franksimsent etetus	■ Employed				☐ Employed			
	attach a separate page with information about additional	Employment status	☐ Not employed				■ Not e	Not employed		
	employers.	Occupation	Accounting As	sociate			Disable	d		
	Include part-time, seasonal, or self-employed work.	Employer's name	M. Holand Com	pany						
	Occupation may include student or homemaker, if it applies.	Employer's address	Northbrook, IL	60062						
		How long employed t	here? 25 yea	rs			_			
Pai	rt 2: Give Details About Mo	nthly Income								
	imate monthly income as of the dust unless you are separated.	late you file this form. If	you have nothing to ı	eport for	any	line, write	\$0 in the	space. Inc	lude your non-f	iling
	ou or your non-filing spouse have m e space, attach a separate sheet to		ombine the information	on for all e	emplo	oyers for	that perso	on on the lin	nes below. If yo	u need
						For De	otor 1	For Deb	otor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	7	,531.00	\$	0.00	
3	Estimate and list monthly over	time nav		3	<b>2</b> +		0.00	<b>_</b> \$	0.00	

7,531.00

\$

0.00

Calculate gross Income. Add line 2 + line 3.

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Deb	tor 1	Diane R. Cantu	_	С	ase numbe	r (if known)				
					For Debto	or 1	Fo	r Debtor	2 or	ı
	Cor	by line 4 here	4.		¢ 7	,531.00	no \$	n-filing s	pouse 0.00	
	·		4.		Φ	,531.00	Φ_		0.00	_
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.			,700.00	\$_		0.00	_
	5b.	Mandatory contributions for retirement plans	5b.		\$	0.00	\$_		0.00	_
	5c.	Voluntary contributions for retirement plans	5c.		\$	103.60	\$_		0.00	_
	5d.	Required repayments of retirement fund loans	5d.		\$	498.82	\$_		0.00	_
	5e.	Insurance	5e.		\$	273.00	\$_		0.00	_
	5f.	Domestic support obligations Union dues	5f.		\$	0.00	\$_ \$		0.00	_
	5g. 5h.	Other deductions. Specify:	5g. 5h.		\$	0.00			0.00	_
			_		. —	0.00	: <del>-</del>			-
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.			,575.42	\$_		0.00	-
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	,	\$4	,955.58	\$_		0.00	_
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.		\$	0.00	\$		0.00	
	8b.	Interest and dividends	8b.		\$	0.00	\$-		0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			\$	0.00	\$		0.00	_
	8d.	Unemployment compensation	8d.		\$	0.00	\$		0.00	_
	8e.	Social Security	8e.		\$	0.00	\$		0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.		\$	0.00	\$_		0.00	_
	8g.	Pension or retirement income	8g.		\$	0.00	\$_		0.00	_
	8h.	Other monthly income. Specify:	8h.	.+	\$	0.00	+ \$_		0.00	-
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	i	0.00	\$_		0.0	0
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$	4 955	.58 + \$		0.00	= \$	4,955.58
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		<u> </u>	4,555			0.00		4,555.56
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depe				•			0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies						e. 12.	\$	4,955.58
			_							y income
13.	Do : ■	you expect an increase or decrease within the year after you file this form No.	?							
	П	Yes. Explain:						-		

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Fill	in this information to identify yo	our case:						
Deb	otor 1 Diane R. Car	ntu			Che	ck if this is:		
	otor 2  Duse, if filing)		☐ An amended filing ☐ A supplement showing postpetition of 13 expenses as of the following date					
Unit	ed States Bankruptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY		
Cas	e number							
(If k	nown)							
O	fficial Form 106J							
S	chedule J: Your	Exper	ises				12/15	
info	as complete and accurate as ormation. If more space is ne nber (if known). Answer eve	eded, atta	ch another sheet to this	e filing together, b form. On the top of	oth are equ f any additi	ually responsible fo onal pages, write y	or supplying correct your name and case	
	t 1: Describe Your House	hold						
1.	Is this a joint case?							
	■ No. Go to line 2.  □ Yes. <b>Does Debtor 2 live</b>	in a separ	ate household?					
	□ No	-						
	☐ Yes. Debtor 2 mu	st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of Deb	otor 2.		
2.	Do you have dependents?	■ No						
	Do not list Debtor 1 and Debtor 2.	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?	
	Do not state the						□ No	
	dependents names.					_	□ Yes □ No	
							☐ Yes	
							□ No	
							☐ Yes	
							□ No □ Yes	
3.	Do your expenses include	_	No				<b>—</b> 103	
	expenses of people other t yourself and your depende		Yes					
Dor	<u> </u>		ly Evnances					
Est	t 2: Estimate Your Ongoi imate your expenses as of y penses as of a date after the plicable date.	our bankrı	uptcy filing date unless y					
the	lude expenses paid for with value of such assistance an ficial Form 106I.)	non-cash d have inc	government assistance it sluded it on Schedule I: Y	f you know Your Income		Your exp	enses	
4.	The rental or home owners payments and any rent for the			nclude first mortgag	e 4. :	\$	1,200.00	
	If not included in line 4:							
	4a. Real estate taxes				4a.	·	0.00	
	4b. Property, homeowner's				4b.		15.00	
	<ul><li>4c. Home maintenance, re</li><li>4d. Homeowner's associa</li></ul>				4c. 4d.	·	50.00 0.00	
5.	Additional mortgage paym			me equity loans	5.	·	0.00	

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Deptor 1 Diane R. Cantu	Case number	(if known)	
5. Utilities:			
6a. Electricity, heat, natural gas	6a. \$		250.00
6b. Water, sewer, garbage collection	6b. \$	-	30.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$		220.00
6d. Other. Specify:	6d. \$	-	0.00
Food and housekeeping supplies	7. \$		750.00
Childcare and children's education costs	8. \$		0.00
	9. \$		125.00
Clothing, laundry, and dry cleaning  Description:  Description:	9. ş 10. \$		
·			50.00
Medical and dental expenses	11. \$		1,300.00
<ul> <li>Transportation. Include gas, maintenance, bus or train fare.</li> <li>Do not include car payments.</li> </ul>	12. \$		600.00
Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$		150.00
. Charitable contributions and religious donations	14. \$	-	0.00
. Insurance.	14. φ		0.00
Do not include insurance deducted from your pay or included in lines 4 or 20.			
15a. Life insurance	15a. \$		0.00
15b. Health insurance	15b. \$		0.00
15c. Vehicle insurance	15c. \$		64.00
15d. Other insurance. Specify:	15d. \$	-	0.00
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	13u. ψ		0.00
Specify: Internal Revenue Service \$8,900 (est)	16. \$		400.00
7. Installment or lease payments:			
17a. Car payments for Vehicle 1	17a. \$		0.00
17b. Car payments for Vehicle 2	17b. \$		0.00
17c. Other. Specify: Bankruptcy Attorneys Fees	17c. \$		200.00
17d. Other. Specify:	17d. \$		0.00
Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. \$		0.00
Other payments you make to support others who do not live with you.	\$		0.00
Specify:	19.		0.00
Other real property expenses not included in lines 4 or 5 of this form or on Sche		Income	
20a. Mortgages on other property	20a. \$	moome.	0.00
20b. Real estate taxes	20b. \$		0.00
20c. Property, homeowner's, or renter's insurance	20c. \$		0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	-	0.00
20e. Homeowner's association or condominium dues	20d. \$		
		Φ	0.00
Other: Specify: Veternary	21. +	<b>Þ</b>	60.00
2. Calculate your monthly expenses		<b>c</b>	5 404 00
22a. Add lines 4 through 21.		\$	5,464.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add line 22a and 22b. The result is your monthly expenses.		\$	5,464.00
3. Calculate your monthly net income.	<u></u>		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$		4,955.58
23b. Copy your monthly expenses from line 22c above.	23b\$	S	5,464.00
	_		
23c. Subtract your monthly expenses from your monthly income.			F00 40
The result is your monthly net income.	23c. \$		-508.42
		•	
<ol> <li>Do you expect an increase or decrease in your expenses within the year after your for example, do you expect to finish paying for your car loan within the year or do you expect your</li> </ol>			e or decrease because
modification to the terms of your mortgage?	- 5 . ,		
■ No.			
T Ves Explain here:			

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Fill in this inform	mation to identify your	case.			
		case.			
Debtor 1	Diane R. Cantu First Name	Middle Name	Last Name		
Debtor 2	T HOLITAGINO	Wildio Hamo	Edot Namo		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	Γ OF ILLINOIS		
Case number _					
(if known)					Check if this is an amended filing
Official Forn	n 106Dec				
		ın Individual	Debtor's Sc	hedules	12/15
If two married pe	eople are filing togethe	r, both are equally respo	onsible for supplying corr	rect information.	
obtaining money		n connection with a ban			ment, concealing property, or 0, or imprisonment for up to 20
Sign	n Below				
Did you pa	y or agree to pay some	one who is NOT an atto	rney to help you fill out b	ankruptcy forms?	
■ No					
☐ Yes. N	Name of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
•	Ity of perjury, I declare e true and correct.	that I have read the sum	nmary and schedules file	d with this declaration	n and
X /s/ Diar	ne R. Cantu		X		

**Diane R. Cantu**Signature of Debtor 1

Date July 27, 2016

Signature of Debtor 2

Date

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		nation to identify you	r case:			
De	btor 1	Diane R. Cantu First Name	Middle Name	Last Name		
	btor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (	OF ILLINOIS		
	se number					Check if this is an
Ì					_	mended filing
	ficial Fo					
St	atement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/16
					equally responsible for sup	
		n). Answer every que			, additional pages, initio yet	
Pa	rt 1: Give D	etails About Your Ma	arital Status and Where You	Lived Before		
1.	What is your	current marital statu	ıs?			
	<ul><li>■ Married</li><li>□ Not mar</li></ul>	ried				
2.	During the la	st 3 vears. have vou	lived anywhere other than	where vou live now?		
	_	,,,	,			
	■ No □ Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>.</i>	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3.					ity property state or territor	
stat	es and territori	es include Arizona, Ca	ilfornia, idano, Louisiana, Ne	vada, New Mexico, Puerto Ri	co, Texas, Washington and V	visconsin.)
	■ No			W:		
	☐ Yes. Ma ———	ke sure you fill out Sci	nedule H: Your Codebtors (Of	ficial Form 106H).		
Pa	rt 2 Explai	n the Sources of You	r Income			
4.	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$44,002.00	☐ Wages, commissions, bonuses, tips	,
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 Diane R. Cantu

				Dalitand			Dalitan 0		
				Debtor 1			Debtor 2		
		Sources of income Check all that apply.	Gross in (before of exclusion	deductions and	Sources of in Check all that		Gross income (before deductions and exclusions)		
	r last caler anuary 1 to	ndar year: December	31, 2015 )	■ Wages, commissions, bonuses, tips		\$83,456.00	☐ Wages, cor bonuses, tips	nmissions,	
				☐ Operating a business			☐ Operating a	a business	
		dar year be December		■ Wages, commissions, bonuses, tips		\$81,874.00	☐ Wages, cor bonuses, tips	nmissions,	
				☐ Operating a business			☐ Operating a	a business	
5.	Include in and other winnings.  List each	come regard public bene If you are fil	dless of wheth fit payments; ing a joint cas the gross inco	e during this year or the two ner that income is taxable. Ex- pensions; rental income; intelse and you have income that you ome from each source separa	camples of o erest; divider you receive	ther income are ids; money colle d together, list it	alimony; child sup cted from lawsuits only once under D	; royalties; an Debtor 1.	
				Debtor 1			Debtor 2		
				Sources of income Describe below.	each so	deductions and	Sources of in Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pa	yments You	Made Before You Filed for	Bankruptc	v			
6.		r Debtor 1's Neither D	or Debtor 2 ebtor 1 nor E	's debts primarily consume Debtor 2 has primarily consumers personal, family, or househo	er debts? umer debts	. Consumer deb	ts are defined in 1	1 U.S.C. § 10	11(8) as "incurred by an
		During the	90 davs befo	ore you filed for bankruptcy, di	lid vou pav a	nv creditor a tot	al of \$6.425* or m	ore?	
		□ No.	Go to line 7	, , , , , , , , , , , , , , , , , , , ,	. , , . , .	,	, , ,		
		□ Yes	paid that cr	each creditor to whom you pareditor. Do not include paymen payments to an attorney for t	nts for dome	stic support obli			
		* Subject		t on 4/01/19 and every 3 year		,	or after the date	of adjustment	t.
	■ Yes.			or both have primarily consu ore you filed for bankruptcy, di			al of \$600 or more	1?	
		□ <sub>No.</sub>	Go to line 7	·.					
		■ Yes	include pay	each creditor to whom you pai ments for domestic support o this bankruptcy case.					
	Creditor	's Name an	d Address	Dates of payme	ent ·	Total amount	Amount you	Was this	payment for
	Curran	· manthle:	rontal nav	oonto		paid ¢o oo	still owe		
	Current	i montniy i	rental payn	ients.		\$0.00	\$0.00	☐ Mortga ☐ Car ☐ Credit ( ☐ Loan R	Card

☐ Other\_\_

Case 16-24101 Doc 1 Filed 07/27/16 Entered 07/27/16 14:14:57 Page 36 of 51 Document ase number (*if known*) Debtor 1 Diane R. Cantu Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Reason for this payment Dates of payment **Total amount** Amount you still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. П No Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Charles and Susan Shimkus v. Collection Circuit Court of Lake Pending Diane Cantu, et al. **Proceedings** County, Illinois On appeal 16 L 527 Waukegan, IL 60085 □ Concluded Check all that apply and fill in the details below.

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

No. Go to line 11.

Yes. Fill in the information below.

**Creditor Name and Address** Value of the Describe the Property Date property Explain what happened

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

Nο

Yes. Fill in the details.

**Creditor Name and Address** Describe the action the creditor took Date action was Amount taken

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

Nο

П Yes Case 16-24101 Doc 1 Filed 07/27/16 Entered 07/27/16 14:14:57 Desc Main

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Case number (if known) Document Debtor 1 Diane R. Cantu

Pa	rt 5: List Certain Gifts and Contributions						
13.	<ul> <li>Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?</li> <li>■ No</li> <li>□ Yes. Fill in the details for each gift.</li> </ul>						
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value			
	Person to Whom You Gave the Gift and Address:						
14.	Within 2 years before you filed for bankruptcy ■ No □ Yes. Fill in the details for each gift or contrib	, did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?			
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value			
Pa	rt 6: List Certain Losses						
15.	Within 1 year before you filed for bankruptcy or gambling?  ■ No □ Yes. Fill in the details.	or since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster,			
	how the loss occurred Inclu	cribe any insurance coverage for the loss de the amount that insurance has paid. List pending rance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost			
Pa	rt 7: List Certain Payments or Transfers						
16.	Within 1 year before you filed for bankruptcy, consulted about seeking bankruptcy or prepa	did you or anyone else acting on your behalf pay or ring a bankruptcy petition? ers, or credit counseling agencies for services required		rty to anyone you			
	<ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>						
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment			
	Magee Hartman, P.C. 444 North Cedar Lake Road Round Lake, IL 60073 bk@mageehartman.com	Attorney Fees		\$1,200.00			
17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you l		or transfer any prope	rty to anyone who			
	■ No □ Yes. Fill in the details.						
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment			

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Debtor 1 Diane R. Cantu

18.	Within 2 years before you filed for bankrupt transferred in the ordinary course of your b Include both outright transfers and transfers mainclude gifts and transfers that you have alread No	usiness or financial affa ade as security (such as t	nirs? he granting of a se				
	Yes. Fill in the details.						
	Person Who Received Transfer Address	Description and v property transferr			any property or received or debts change	Date transfer wa made	S
	Person's relationship to you						
9.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro		y property to a s	elf-settled tru	ust or similar device o	f which you are a	í
	☐ Yes. Fill in the details.						
	Name of trust	Description and v	alue of the prope	erty transferr	ed	Date Transfer wa	as
Par	t 8: List of Certain Financial Accounts, Ins	struments Safe Denosit	Boxes and Stor	age Units			
ı eı	List of Certain Financial Accounts, inc	struments, oare beposit	Boxes, and otor	age onits			
20.	Within 1 year before you filed for bankruptc sold, moved, or transferred? Include checking, savings, money market, or	or other financial accour	nts; certificates o			•	
	houses, pension funds, cooperatives, assoc	ciations, and other finan	icial institutions.				
	No						
	Yes. Fill in the details.						
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accountinstrument	clo	te account was osed, sold, oved, or onsferred	Last balan before closing trans	or
21.	Do you now have, or did you have within 1 y cash, or other valuables?	year before you filed for	bankruptcy, any	safe deposi	t box or other deposit	ory for securities	,
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		escribe the	contents	Do you still have it?	
22.	Have you stored property in a storage unit of	or place other than your	home within 1 ye	ear before yo	ou filed for bankruptcy	/?	
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St		escribe the	contents	Do you still have it?	
		State and ZIP Code)					
Par	t 9: Identify Property You Hold or Control	for Someone Else					
23.	Do you hold or control any property that so for someone.	meone else owns? Inclu	ude any property	you borrowe	ed from, are storing fo	or, or hold in trust	:
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		escribe the	property	Val	ue
Par	t 10: Give Details About Environmental Info	,					
or	the purpose of Part 10, the following definition	ons apply:					

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 5 Case 16-24101 Doc 1 Filed 07/27/16 Entered 07/27/16 14:14:57 Desc Main Page 39 of 51 Case number (if known) Document

Debtor 1 Diane R. Cantu

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

	hazardous material, pollutant, contaminant, or similar term.					,	
Rep	Report all notices, releases, and proceedings that you know about, regardless of when they occurred.						
24.	Has	any governmental unit notified you that	you may be liable or potentially liable	und	er or in violation of an environme	ntal law?	
		No					
	_	Yes. Fill in the details.					
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	t	Environmental law, if you know it	Date of notice	
25.	Hav	re you notified any governmental unit of	any release of hazardous material?				
	■ No □ Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice	
26.	Hav	re you been a party in any judicial or adn	ninistrative proceeding under any envi	ronn	nental law? Include settlements a	nd orders.	
	■ No □ Yes. Fill in the details.						
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ure of the case	Status of the case	
Par	t 11:	Give Details About Your Business or	Connections to Any Business				
		_		v of	the following connections to any	husiness?	
27.	VVIL	hin 4 years before you filed for bankrupt $\Box$ A sole proprietor or self-employed in	• •	-	•	Dusiliess :	
		<ul> <li>□ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time</li> <li>□ A member of a limited liability company (LLC) or limited liability partnership (LLP)</li> </ul>					
		☐ A partner in a partnership	any (220) or miniou habitity parational	.p (=	<b>-</b> . ,		
	☐ An officer, director, or managing executive of a corporation						
	☐ An owner of at least 5% of the voting or equity securities of a corporation						
	No. None of the above applies. Go to Part 12.						
	_	Yes. Check all that apply above and fill		<b>.</b>			
	Bu	siness Name	Describe the nature of the business	-	Employer Identification number		
		dress mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security r	number or ITIN.	
					Dates business existed		
28.		hin 2 years before you filed for bankrupt citutions, creditors, or other parties.	cy, did you give a financial statement t	o an	yone about your business? Inclu	de all financial	
		No					
		Yes. Fill in the details below.					
	Ad	me dress mber, Street, City, State and ZIP Code)	Date Issued				
_	_						

Part 12: Sign Below

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Debtor 1 Diane R. Cantu

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Dia	ne R. Cantu	
Diane R. Cantu		Signature of Debtor 2
Signat	ure of Debtor 1	
Date	July 27, 2016	Date
Did you	ı attach additional ı	ages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No		
☐ Yes		
Did you	ı pay or agree to pa	y someone who is not an attorney to help you fill out bankruptcy forms?
■ No		
П УΔς	Name of Person	. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debtor 1	mation to identify your			
Deptor 1	Diane R. Cantu First Name	Middle Name	Last Name	_
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	_
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	_
Case number				
(if known)				Check if this is an amended filing
Official Fo	orm 108			
Stateme	nt of Intentio	n for Individu	ials Filing Under Cha	apter 7 12/15
f you are an ind	lividual filing under cha	pter 7, you must fill out t	his form if:	
	e claims secured by yo	• •		
you have leas	sed personal property a	and the lease has not exp	pired.	
You must file th	is form with the court w	rithin 30 days after you fi	le your bankruptcy petition or by the	date set for the meeting of creditors, s to the creditors and lessors you list

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

on the form

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1	Diane R. Cantu	Case number (if kno	wn)
name:  Descrip propert securin	у	<ul> <li>□ Retain the property and redeem it.</li> <li>□ Retain the property and enter into a Reaffirmation Agreement.</li> <li>□ Retain the property and [explain]:</li> </ul>	□ Yes
For any ur in the info	rmation below. Do not list real estat	erty Leases at you listed in Schedule G: Executory Contracts and Unexp e leases. Unexpired leases are leases that are still in effect; erty lease if the trustee does not assume it. 11 U.S.C. § 365(	the lease period has not yet ended.
Describe	your unexpired personal property le	eases	Will the lease be assumed?
Lessor's n Descriptio Property:	name: on of leased		□ No
Lessor's n Descriptio Property:	name: on of leased		□ No □ Yes
Lessor's n Descriptio Property:	name: on of leased		□ No □ Yes
Lessor's n Descriptio Property:	name: on of leased		□ No □ Yes
Lessor's n Descriptio Property:	name: on of leased		□ No □ Yes
Lessor's n Descriptio Property:	name: on of leased		□ No
Lessor's n Descriptio Property:	name: on of leased		□ No □ Yes
Under per property t	hat is subject to an unexpired lease.		
Diar	Diane R. Cantu ne R. Cantu ature of Debtor 1	Signature of Debtor 2	
Date	July 27, 2016	Date	

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	_
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-24101 Doc 1 Filed 07/27/16 Entered 07/27/16 14:14:57 Desc Main Document Page 47 of 51

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court Northern District of Illinois**

In r	e Diane R. Cantu		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENSA	ATION OF ATTO	RNEY FOR DI	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of or	the petition in bankruptc	y, or agreed to be paid	to me, for services rendered or	to
	For legal services, I have agreed to accept		\$	2,000.00	
	Prior to the filing of this statement I have received		\$	832.00	
	Balance Due		\$	1,168.00	
2.	\$335.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed compensa	ation with any other person	n unless they are mem	bers and associates of my law fi	irm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names of				A
6.	In return for the above-disclosed fee, I have agreed to render	legal service for all aspe	cts of the bankruptcy of	ase, including:	
	<ul> <li>a. Analysis of the debtor's financial situation, and rendering</li> <li>b. Preparation and filing of any petition, schedules, statement</li> <li>c. Representation of the debtor at the meeting of creditors and</li> <li>d. [Other provisions as needed]         Negotiations with secured creditors to redunce affirmation agreements and applications are for payment of balance due, representation and any adjourned hearings thereof.     </li> </ul>	nt of affairs and plan whic nd confirmation hearing, a ace to market value; ex as needed; Upon conf	ch may be required; and any adjourned hea xemption planning; firmation of written	rings thereof; preparation and filing of Post-Petition Fee Agreeme	ent
7.	By agreement with the debtor(s), the above-disclosed fee door Representation of the debtors in any discharge any other adversary proceeding.	es not include the following argeability actions, jud	ng service: dicial lien avoidanc	es, relief from stay actions	or
	C	ERTIFICATION			
this	I certify that the foregoing is a complete statement of any agriculture proceeding.	reement or arrangement for	or payment to me for r	epresentation of the debtor(s) in	L
	July 27, 2016	/s/ James T. Mag			
_	Date	James T. Magee	1729446		
		Signature of Attorn Magee Hartman			
		444 North Ceda	r Lake Road		
		Round Lake, IL (847) 546-0055	60073 Fax: (847) 546-8390	)	
		bk@mageehartr		,	
		Name of law firm			

### **United States Bankruptcy Court** Northern District of Illinois

In re	Diane R. Cantu		Case No.	
		Debtor(s)	Chapter <b>7</b>	
	VE	RIFICATION OF CREDITOR M	IATRIX	
		Number of	Creditors:	23
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credi	tors is true and correct to the	he best of my
Date:	July 27, 2016	/s/ Diane R. Cantu Diane R. Cantu Signature of Debtor		

Advocate Condell Medical Center c/o Harris & Harris, Ltd. 222 Merchandise Mart Plaza, #1900 Chicago, IL 60654

Advocate Condell Medical Center c/o Harris & Harris, Ltd. 111 West Jackson Blvd., #400 Chicago, IL 60604-4134

AT&T Mobility c/o Afni P. O. Box 3097 Bloomington, IL 61702

Charles and Susan Shimkus c/o Cartwright Law, P.C. 728 Florsheim Drive Libertyville, IL 60048

Chicago Imaging Associates c/o Merchants' Credit Guide Co. 223 W. Jackson Blvd., #400 Chicago, IL 60606

Comcast c/o IC Systems P. O. Box 64378 Saint Paul, MN 55164-0378

Erac Region N c/o Greentree & Associates P. O. Box 3417 Escondido, CA 92033-3417

Great Lakes Credit Union Building 290 Great Lakes, IL 60088

Internal Revenue Service P. O. Box 7346 Philadelphia, PA 19101-7346

Lake Zurich Police Photo Enforcemen c/o Northwest Collectors 3601 Algonquin Road, #232 Rolling Meadows, IL 60008

Northwestern Medical Group 26609 Network Place Chicago, IL 60673-1266

Northwestern Medicine c/o Harris & Harris, Ltd. 111 West Jackson Blvd., #400 Chicago, IL 60604-4135

Northwestern Medicine Lake Forest Hospital 660 North Westmoreland Road Lake Forest, IL 60045

Northwestern Medicine 28155 Network Place Chicago, IL 60673-1281

Quest Diagnostics Incorporated c/o American Medical Collection 4 Westchester Plaza, Building 4 Elmsford, NY 10523

Saint Francis Hospital c/o Grant & Weber 26575 West Agoura Road Calabasas, CA 91302

Saint Francis Hospital c/o Grant & Weber, Inc. 861 Coronado Ctr Drive, #211 Henderson, NV 89052

Saint Joseph Hospital c/o Grand & Weber 26575 West Agoura Road Calabasas, CA 91302 Saint Joseph Hospital c/o Grant & Weber, Inc. 861 Coronado Ctr Drive, #211 Henderson, NV 89052

Sigma Health P.C. 10640 West 165th Street Orland Park, IL 60467-8734

The Family Stress Clinic 1641 North Milwaukee Avenue, #7 Libertyville, IL 60048

United Hospital System P. O. Box 130 Kenosha, WI 53141-0130

Women's Health Group 800 Austin Street East Tower, Suite 354 Evanston, IL 60202-3454